

**Opponent Testimony to the Ohio Senate Health Committee
Ohio State Medical Association
SB 36 – Optometrists: Scope of Practice
Presented by Monica Hueckel, VP, Advocacy**

October 22, 2025

Chairman Huffman, Vice Chair Johnson, Ranking Member Liston and members of the Senate Health Committee, my name is Monica Hueckel and I am here on behalf of the Ohio State Medical Association (OSMA), the state's oldest and largest professional organization representing Ohio physicians, medical residents, and medical students. We would like to thank the committee for the opportunity to testify regarding SB 36 today.

OSMA is committed to advocating for the physician-led, team-based care model. This is the current relationship through which physicians and allied practitioners work safely and efficiently to deliver high-quality, coordinated care. The current collaborative model is the evidence-based and patient preferred choice for high-quality patient health outcomes. Working together in a collaborative model with the experience and education of a physician leading the team is the best way to coordinate treatment effectively and take advantage of the skills and training of each member of the team. Unfortunately SB 36 misses the mark on this and would take the state in an opposite direction when it comes to team based healthcare.

Access to Care

Access to care is always a concern in today's healthcare system in Ohio and across the country. Ophthalmology and all of organized medicine are continually assessing the best way to increase the ability for patients to receive the best care when they need it in the most appropriate manner. Last week the proponents provided some anecdotal examples related to access. Upon an actual review of available data from Ohio and other states shows that there is not a significant access problem to getting these procedures done in Ohio and the experience in other states is that access hasn't increased when surgical privileges have been granted through legislative change.

We surveyed ophthalmology offices across the state and found that on average the proposed procedures can be scheduled in one week. Also, as the doctors will review in their testimony, most of the proposed procedures are not emergent in nature and should be done by the surgeon who is currently seeing the patient, particularly with respect to the YAG laser where the surgeon has already done a cataract surgery on the patient. Additionally, based on Medicare Physician file data, 99% of Ohio's population lives within a 30 minute drive of an ophthalmologist's office.

We also reviewed national billing data from Medicare fee for service claims and it shows for those states which have passed similar surgical expansion, very few optometrists in these states chose to perform these surgeries, and many of those who do are practicing out of ophthalmology practices, only about 8% billed for YAG lasers and about 1% billed for SLT/ALT procedures. The extremely low percentages of optometrists filing claims for performing surgical procedures is an indicator that even where it is

allowed, optometric surgical experience remains low and does not provide a meaningful solution to any challenges related to access to care.

Impact on Work Force

Similar to access, work force is certainly a challenge across all of healthcare. Ophthalmology and organized medicine are partnering with educational institutions, state and federal government agencies and other healthcare institutions and associations to address the needs of Ohio and local communities.

However, the data shows there is no evidence that the scope of practice expansion proposed in SB 36 will meaningfully address the healthcare workforce issue in Ohio. The proponents testified last week that about a half of the recent graduating classes from the OSU optometry school are leaving Ohio. What they failed to mention was that the overwhelming majority of the graduates leaving aren't going to states that allow surgery. They are going to states with similar scopes as Ohio, in some cases more restrictive. Specifically, when reviewing the approximately 127 graduates from 2023 and 2024 only 8 became licensed in surgical states and 5 of them were returning to their home state or near their home state and 2 joined pediatric practices that don't use lasers. So the facts show that the supposed "flood" of optometry graduates leaving Ohio so they can go do laser surgery is simply a false narrative.

While the proponents also dismissed the recent trends from the Vision Professions Board and Optometry Board over the last ten years, the data trends are clear - the number of licensed optometrists in Ohio has actually increased by 277 or 12.6% from 2,199 in 2014 to 2,476 in 2024. Regardless of the make-up of this group, the facts show that while Ohio's population has been stagnant, the number of optometrists has been increasing. If Ohio was having problems retaining optometrists because of a "limited" scope of practice as the proponents claim, you would assume the total number would be decreasing not increasing. Our healthcare workforce challenges are real and we should work collaboratively to address them, but no currently available data suggests that SB 36 is a solution.

OSMA is thankful to members of the committee for your attention to our comments and concerns on this legislation, and appreciates the opportunity to be a meaningful contributor to the legislative process. Thank you for giving me the opportunity to testify today, I am happy to take any questions the committee might have before we hear from our clinical experts today.